SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

		LINE			:	PAGE	=	6	OF	23
(c	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

NAME OF COMMITTEE (In Full) Friends of Medical Research		to solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) Jed Manocherian Mailing Address 18 E 50th Street	I Name (Last, First, Middle Initial) ed Manocherian					
	09 15 2015					
City	State Zip Code	Transaction ID : SA11AI.4575				
New York	NY 10022	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	5000.00				
Name of Employer	Occupation	Individual Contribution				
Woodbranch Investments	Real Estate					
Receipt For:	Aggregate Year-to-Date ▼	_				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					
Full Name (Last, First, Middle Initial) Jonathan Manocherian	Date of Receipt					
Mailing Address 18 E 50th Street	09 15 2015					
City	State Zip Code	Transaction ID : SA11AI.4584				
New York	NY 10022	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	5000.00				
Name of Employer	Occupation	Individual Contribution				
N/A	Student					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	5000.00					
Full Name (Last, First, Middle Initial) Joshua Manocherian	_ I	Date of Receipt				
Mailing Address 145 W 67th Street Apt. 47E		09 15 2015				
City	State Zip Code	Transaction ID : SA11AI.4585				
New York	NY 10023	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	5000.00				
Name of Employer	Individual Contribution					
N/A						
Receipt For:	Student Aggregate Year-to-Date ▼	_				
Primary General						
Other (specify) ▼	5000.00					
LIPTOTAL of Possints This Page (entional)	15000.00				